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|--|----------------------------------|--------------------------------|-----------------------------|---------------------------------|
| <b>AMENDMENT TRANSMITTAL LETTER</b>  |                                  |                                |                             | Docket No.<br>09865/0205073-US0 |
| Application No.<br>10/596,827-Conf. #1997  | Filing Date<br>June 26, 2006     | Examiner<br>P. L. Morris       | Art Unit<br>1625            |                                 |
| Applicant(s):  |                                  |                                |                             |                                 |
| Invention: OCTAHYDRONAPHTHALENE DERIVATIVE AND MEDICINE  |                                  |                                |                             |                                 |
| <b>TO THE COMMISSIONER FOR PATENTS</b>   |                                  |                                |                             |                                 |
| Transmitted herewith is an Amendment and Petition for Extension of Time in the above-identified application.   |                                  |                                |                             |                                 |
| The fee has been calculated and is transmitted as shown below.   |                                  |                                |                             |                                 |
| <b>CLAIMS AS AMENDED</b>   |                                  |                                |                             |                                 |
| Total Claims   | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate                            |
| 4  | - 20 =                           |                                |                             | x                               |
| Independent Claims   | 1                                | - 3 =                          |                             | x                               |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>   |                                  |                                |                             |                                 |
| Other fee (please specify): Extension for response within third month  |                                  |                                |                             | 1,110.00                        |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>  |                                  |                                |                             | 1,110.00                        |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity<br><input type="checkbox"/> No additional fee is required for this amendment.<br><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____.<br><input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.<br><input checked="" type="checkbox"/> Payment by credit card.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 as described below.<br><input checked="" type="checkbox"/> Credit any overpayment.<br><input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. |                                  |                                |                             |                                 |
| <br>Lydia G. Olson<br>Attorney/Agent Reg. No.: 48,487   |                                  |                                |                             |                                 |
| Dated: December 2, 2009  |                                  |                                |                             |                                 |
| DARBY & DARBY P.C.<br>P.O. Box 770<br>Church Street Station<br>New York, New York 10008-0770<br>(206) 262-8913   |                                  |                                |                             |                                 |